



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office

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APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO.
09/462179	3/10/2008	Peduto	4162

EXAMINER
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Patterson

ART UNIT	PAPER NUMBER
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1772

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Best Available Copy

DATE MAILED:

INTERVIEW SUMMARY

All participants (applicant, applicant's representative, PTO personnel):

(1) Mr. Roger Lee (Reg. No. 46,317)

(3)

(2) Marc Patterson (PTO)

(4)

Date of Interview 2/14/03

Type: ☐ Telephonic ☐ Televideo Conference ☒ Personal (copy is given to ☐ applicant ☒ applicant's representative).

Exhibit shown or demonstration conducted: ☐ Yes ☒ No If yes, brief description:

Agreement ☐ was reached. ☒ was not reached.

Claim(s) discussed: all of the record

Id ntification of prior art discussed: all of the record

Description of the general nature of what was agreed to if an agreement was reached, or any other comments: The prior art of record, specifically patent documents related to Kerschbaumer et al, do not <sup>appear to</sup> show Grilon CABLE in the external layer, and would appear to overcome the rejection of record. Examiner agreed that the submission of said documents would likely overcome the rejection of record.

(A fuller description, if necessary, and a copy of the amendments, if available, which the examiner agreed would render the claims allowable must be attached. Also, where no copy of the amendments which would render the claims allowable is available, a summary thereof must be attached.)

☐ It is not necessary for applicant to provide a separate record of the substance of the interview.

Unless the paragraph above has been checked to indicate to the contrary, A FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION IS NOT WAIVED AND MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW.

Examiner Note: You must sign this form unless it is an attachment to another form.